

STATE OF ARIZONA

NOMINATION PAPER AFFIDAVIT OF QUALIFICATION CAMPAIGN FINANCE LAWS STATEMENT [A.R.S. §§ 16-311, 16-905(I)(5)]

SECRETARY OF STATE
2016 JUN - I AM 9: 51

FOR OFFICE USE ONLY

You are hereby notified that I, the undersigned, a qualifi	ied elector, am a candidate fo	r the office of
Representative, Legislative District 25	St.	ubject to the
action of the Republican	Party, at the Prima	ary Election to
	, and at the General Election to be held	
	, should I be nominated.	
I will have been a citizen of the United States for 39 years next preceding my election and will		
have been a citizen of Arizona for 33 years next preceding my election and will meet the age		
requirement for the office I seek and have resided in Maricop	Da County for 33	years and in
precinct Porter for 15 years before my election.		
I do solemnly swear (or affirm) that at the time of filing, I am a resident of the county, district or		
precinct which I propose to represent, I have no final, outstanding judgments against me of more than an		
aggregate of \$1,000 that arose from failure to comply with or enforcement of ARS Title 16, Chapter 6, and as		
to all other qualifications, I will be qualified at the time of election		
the constitutional and statutory requirements for holding said office	·	J
045 F 746 Otro -4		0.5000
915 E. 7th Street	Mesa	85203
Actual residence address or description of place of residence	(city or town)	(zip)
n/a		
Post office address	(city or town)	(zip)
Post office address	,	(zip)
Post office address Print or type your name on the following line	in the exact manner you	(zip)
Post office address	in the exact manner you	(zip)
Post office address Print or type your name on the following line	in the exact manner you	(zip)
Post office address Print or type your name on the following line wish it to appear on the ballot. A.R.	in the exact manner you	(zip)
Print or type your name on the following line wish it to appear on the ballot. A.R. Groen Ross	in the exact manner you S. § 16-311(G).	(zip)
Print or type your name on the following line wish it to appear on the ballot. A.R. Groen Ross LAST NAME	in the exact manner you S. § 16-311(G).	(zip)
Print or type your name on the following line wish it to appear on the ballot. A.R. Groen Ross	in the exact manner you S. § 16-311(G). FIRST NAME	(zip)
Print or type your name on the following line wish it to appear on the ballot. A.R. Groen LAST NAME State of Anzona	in the exact manner you S. § 16-311(G). FIRST NAME CANDIDATE SIGNATURE	(zip)
Print or type your name on the following line wish it to appear on the ballot. A.R. Groen LAST NAME State of Antona County of Manicopa	in the exact manner you S. § 16-311(G). FIRST NAME CANDIDATE SIGNATURE	
Print or type your name on the following line wish it to appear on the ballot. A.R. Groen Ross LAST NAME State of Arizona County of Maricopa Subscribed and sworn to (or affirmed) before me this MANUEL RAMIREZ Notary Public - Arizona Maricopa County	in the exact manner you S. § 16-311(G). FIRST NAME CANDIDATE SIGNATURE day of	
Print or type your name on the following line wish it to appear on the ballot. A.R. Groen Ross LAST NAME State of Antona County of Manicopa Subscribed and sworn to (or affirmed) before me this MANUEL RAMIREZ Notary Public - Arizona Maricopa County My Comm. Expires Feb 8, 2019	in the exact manner you S. § 16-311(G). FIRST NAME CANDIDATE SIGNATURE day of	